

DECLARATION (37 CFR 1.63) AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, and

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled CRYSTALLINE CEPHALOSPORIN HYDROHALIDE SALTS

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint Robert A. Armitage (Registration No. 27,417), Sidney B. Williams, Jr. (Registration No. 24,949), L. Ruth Hattan (Registration 26,657), and the following person(s) registered to practice before the Patent and Trademark Office as my attorneys with full power of substitution and revocation to prosecute this application and all divisions and continuations thereof and to transact all business in the Patent and Trademark Office connected therewith and request that all correspondence and telephone communications be directed to the following person(s) at the mailing address and telephone number hereafter given:

Name : JOHN T. REYNOLDS
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Date
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Second Inventor's signature Jay A. Campbell 25 OCT 84Full name of second joint inventor, if any 402 Jay A. Campbell DateResidence Kalamazoo County Citizenship USAPost Office Address 5113 Midfield DrivePortage, Michigan 49002 111

Third Inventor's signature _____ Date

Full name of third joint inventor, if any _____

Residence _____ Citizenship _____

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Fourth Inventor's signature _____ Date

Full name of fourth joint inventor, if any _____

Residence _____ Citizenship _____

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Fifth Inventor's signature _____ Date

Full name of fifth joint inventor, if any _____

Residence _____ Citizenship _____

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Sixth Inventor's signature _____ Date

Full name of sixth joint inventor, if any _____

Residence _____ Citizenship _____

Post Office Address _____

Seventh Inventor's signature _____ Date

Full name of seventh joint inventor, if any _____

Residence _____ Citizenship _____

Post Office Address _____